

CENTRAL REGION DHBS CARDIOLOGY PROJECT

NEWSLETTER NO 2

JULY 2008

CARDIOLOGY IMPLEMENTATION GROUP



Cardiology Implementation Group: Kevin Simpson, Mark Simmonds, Laura Davidson, Beth Tester, Anne Hampton, Mandy Robinson, Ana Apatu, Judy Dewar, Angela Morgan
Absent: Pauline Hinds, Lindsey Bates, David Nixon

Dear Colleagues

The Cardiology Implementation Group has had a very busy couple of months finalising project scopes, establishing working groups and commencing the project role outs which are creating a buzz of activity.

Key learning's from the cardiology implementation group to date include:

- the need to prioritise between the immediate, short term and long term areas for change
- the importance of involvement of clinicians, GP's and consumers
- the importance of quality assurance and evaluation processes
- the benefit of access to integrated and accurate data and information systems.

Networks and relationships established during this project will facilitate information and resource sharing which will hopefully prevent duplication of work already undertaken within the region.

Cardiology Project Update

Priorities/activities of the different workgroups are outlined below:

Cardiac Technician and Technologists

Phase one of this project is now complete with the final report being distributed to all Central Regions DHBS in early July.

Key recommendations from the report include:

- establishment of a regional cardiac physiology training coordinator role

- establishment of a regional training programme for cardiac physiology staff
- standardised cardiac physiology data collection across the region
- consistent HR processes for employment of cardiac physiology staff
- increasing access to ECGs within primary care.

The working party meets in Wellington on 8th August to progress the implementation of the twenty recommendations within the report. Should you wish to access a copy of the report please email sarah_greenfield@centraltas.co.nz or phone 04 801 2453.

Cardiology Data Collection

Improving the quality of health care requires performance measurement and feedback. To begin standardised cardiac data collection for cardiac physiologists, coronary care units and cardiac catheterisation laboratories the Central Regions DHBS are inputting defined data into a central web based repository.

By having standard language tools, we will be able to make logical and accurate comparisons in our assessment of care provided to patients within cardiology services. Such standardisation will permit more accurate and useful comparisons of cardiac care across the Central Region.

Cardiac Rehabilitation and Heart Failure Project

The working group has identified the following four key priority areas for action over the next few months:

- summarise issues impacting upon current and future cardiac rehabilitation and heart failure services
- undertake a stocktake of the current Central Region cardiac rehabilitation and heart failure workforce. This will include numbers, roles and skill levels, and a gap analysis
- undertake a stocktake of current service provision
- document different models of care for cardiac rehabilitation and heart failure within the Central Region, nationally and internationally.

Pre Hospital Thrombolysis

The goal of this project is to ensure equity of access to pre hospital thrombolytic therapy in rural areas throughout the Central Region.

Areas for improved access have been identified. We will need to work closely with the ambulance service providers in each region and the Ministry of Health as double crewing is a prerequisite to implement this initiative and several regions do not currently have this capability.

Cardiovascular Risk Assessment

Cardiovascular risk assessment is a national priority and within the Central Region we are aiming to ensure positive uptake of screening for the high priority groups.

Key opportunities for cardiovascular care that have been identified include:

- improving the identification of patients at risk of a cardiovascular event
- addressing risk factors
- improving patient education services and supporting patient self management.
- fostering of specialist and generalist collaboration to improve patient care outcomes

Regional Evaluation Framework

The workgroup has developed a draft evaluation tool which will create a framework to support the effective roll-out of pilot programmes and new initiatives planned across the Central Region for Cardiology.

This framework will be trialled with the evaluation of the NMDHB Percutaneous Coronary Intervention (PCI) programme in October this year. It is planned that TAS and NMDHB will present the outcomes of the PCI evaluation at the Cardiac Society meeting in 2009.

Regional Clinical Audit

Prior to the end of the year we hope to have an agreed annual programme of regional clinical audit activity and effective systems in place to support audit, implement changes and share findings. If you have any suggestions for potential regional audit programmes please contact either mark.simmonds@ccdhb.govt.nz or beth_tester@centraltas.co.nz

Hauora Maori Standards of Health IV

This is an excellent resource document and we would encourage you all to either get or access a copy. Copies can be obtained from moh@wickliffe.co.nz. In the cardiovascular section of the document it is identified that there is disparity in the number of Māori versus non Māori receiving cardiac invasive procedures and it was noted that further investigation was required to explain why Māori with the highest cardiac death rate and cardiovascular risk accessed invasive cardiac procedures less often than non Māori. It is hoped that the CIG and the Eru Pōmare researchers could work together to perhaps get a clearer understanding of what is happening in this region.

Thank you

Mark and Beth would like to thank you all for helping move the Regional Cardiology project along so quickly. We know the day to day pressures you all struggle with and appreciate the extra effort given to this project. There are still key people we need to connect with and will endeavour to catch up with you all over the next few months but please remember if you have any queries about the project do not hesitate to contact Beth on 027 500 5052 or Mark via email.

Best wishes

Mark and Beth

We are told humour is good for the soul so we hope you enjoy this cartoon (NB it is not an innovation we are planning to implement!)

